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PTO/SB/122 (08-03)

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Application Number	09/936,957
Filing Date	January 09, 2002
First Named Inventor	Melkie, Peter John
Art Unit	1641
Examiner Name	Cook, Lisa V.
Attorney Docket Number	021385-014010US

12/5/03

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- ☒ Attorney or agent of record. Registration Number 37,505
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Typed or
Printed Name Joe Liebeschuetz

Signature

J. Liebeschuetz

Date November 18, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/936,957
		Filing Date	January 9, 2002
		First Named Inventor	Meikle, Peter John
		Art Unit	1641
		Examiner Name	Lisa V. Cook
Total Number of Pages in This Submission	2	Attorney Docket Number	021385-014010US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee-Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> PTO/SB/122 Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
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Signature	
Date	November 18, 2003

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Signature		Date	November 18, 2003